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PTO/SB/01 (10-00)

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted With Initial Filing **OR** ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

|                               |                             |
|-------------------------------|-----------------------------|
| <b>Attorney Docket Number</b> | PU030282                    |
| <b>First Named Inventor</b>   | Jill MacDonald Boyce et al. |
| <b>COMPLETE IF KNOWN</b>      |                             |
| <b>Application Number</b>     | /                           |
| <b>Filing Date</b>            | HEREWITH                    |
| <b>Group Art Unit</b>         |                             |
| <b>Examiner Name</b>          |                             |

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**TECHNIQUE FOR BIT-ACCURATE FILM GRAIN SIMULATION**

the specification of which (Title of the Invention)

☐ is attached hereto

**OR**

☒ was filed on (MM/DD/YYYY) **October 12, 2004** as United States Application Number or PCT International

Application Number **PCT/US2004/033713** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) Country | Priority Not Claimed     | Certified Copy Attached? |                          |
|-------------------------------------|---------|------------------------------------------|--------------------------|--------------------------|--------------------------|
|                                     |         |                                          |                          | YES                      | NO                       |
|                                     |         |                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. |
|-----------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|
| 60/511,026            | October 14, 2003         |                                                                                                                                                  |

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

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|                |                                   |                  |  |
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR:**  ☐ A petition has been filed for this unsigned inventor

|                   |                               |
|-------------------|-------------------------------|
| <b>Given Name</b> | <b>Family Name or Surname</b> |
| Jill MacDonald    | Boyce                         |

|                             |              |                |                    |
|-----------------------------|--------------|----------------|--------------------|
| <b>Inventor's Signature</b> | <b>Date</b>  |                |                    |
| <i>Jill MacDonald Boyce</i> | 10/28/04     |                |                    |
| <b>Residence: City</b>      | <b>State</b> | <b>Country</b> | <b>Citizenship</b> |
| MANALAPAN                   | NJ           | US             | US                 |

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| <b>City</b>            | <b>State</b> | <b>ZIP</b> | <b>Country</b> |
| Manalapan              | NJ           | 08540      | US             |

**NAME OF SECOND INVENTOR:**  ☐ A petition has been filed for this unsigned inventor

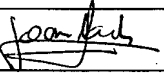
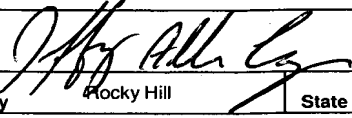
|                   |                               |
|-------------------|-------------------------------|
| <b>Given Name</b> | <b>Family Name or Surname</b> |
| Cristina          | Gomila                        |

|                             |              |                |                    |
|-----------------------------|--------------|----------------|--------------------|
| <b>Inventor's Signature</b> | <b>Date</b>  |                |                    |
| <i>Cristina Gomila</i>      | 10/18/04     |                |                    |
| <b>Residence:</b>           | <b>State</b> | <b>Country</b> | <b>Citizenship</b> |
| Princeton                   | NJ           | US             | ES                 |

|                        |              |            |                |
|------------------------|--------------|------------|----------------|
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| <b>City</b>            | <b>State</b> | <b>ZIP</b> | <b>Country</b> |
| Princeton              | NJ           | 08540      | US             |

☒ Additional Inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

**DECLARATION****ADDITIONAL INVENTOR(S)  
Supplemental Sheet**Page 3 of 4

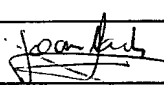
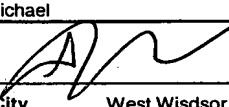

|                                                                                                          |              |                                                                               |     |
|----------------------------------------------------------------------------------------------------------|--------------|-------------------------------------------------------------------------------|-----|
| <b>Name of Additional Inventor, if any</b>                                                               |              | <input type="checkbox"/> A petition has been filed for this unsigned inventor |     |
| Given Name (first and middle (if any))                                                                   |              | Family Name or Surname                                                        |     |
| Joan                                                                                                     |              | Llach                                                                         |     |
| Inventor's Signature    |              | Date 10/18/04                                                                 |     |
| Residence: City                                                                                          | Princeton    | State                                                                         | NJ  |
| Country                                                                                                  | USA          | Citizenship                                                                   | ES  |
| Mailing Address 25C Chestnut Court                                                                       |              |                                                                               |     |
| Mailing Address                                                                                          |              |                                                                               |     |
| City                                                                                                     | Princeton    | State                                                                         | NJ  |
| ZIP                                                                                                      | 08540        | Country                                                                       | USA |
| <b>Name of Additional Inventor, if any</b>                                                               |              | <input type="checkbox"/> A petition has been filed for this unsigned inventor |     |
| Given Name (first and middle (if any))                                                                   |              | Family Name or Surname                                                        |     |
| Alexandros Michael                                                                                       |              | Tourapis                                                                      |     |
| Inventor's Signature                                                                                     |              | Date                                                                          |     |
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| Country                                                                                                  | USA          | Citizenship                                                                   | GR  |
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| Mailing Address                                                                                          |              |                                                                               |     |
| City                                                                                                     | West Windsor | State                                                                         | NJ  |
| Zip                                                                                                      | 08540        | Country                                                                       | USA |
| <b>Name of Additional Inventor, if any</b>                                                               |              | <input type="checkbox"/> A petition has been filed for this unsigned inventor |     |
| Given Name (first and middle (if any))                                                                   |              | Family Name or Surname                                                        |     |
| Jeffrey Allen                                                                                            |              | Cooper                                                                        |     |
| Inventor's Signature  |              | Date 12/3/04                                                                  |     |
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| Country                                                                                                  | 08540        | Citizenship                                                                   | US  |
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| Zip                                                                                                      | 08540        | Country                                                                       | USA |

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**DECLARATION****ADDITIONAL INVENTOR(S)  
Supplemental Sheet**

Page 3 of 4

|                                                                                                          |              |                                                                               |     |
|----------------------------------------------------------------------------------------------------------|--------------|-------------------------------------------------------------------------------|-----|
| <b>Name of Additional Inventor, if any</b>                                                               |              | <input type="checkbox"/> A petition has been filed for this unsigned inventor |     |
| Given Name (first and middle (if any))                                                                   |              | Family Name or Surname                                                        |     |
| Joan                                                                                                     |              | Llach                                                                         |     |
| Inventor's Signature    |              | Date 10/13/04                                                                 |     |
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| Country                                                                                                  | USA          | Citizenship                                                                   | ES  |
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| Mailing Address                                                                                          |              |                                                                               |     |
| City                                                                                                     | Princeton    | State                                                                         | NJ  |
| ZIP                                                                                                      | 08540        | Country                                                                       | USA |
| <b>Name of Additional Inventor, if any</b>                                                               |              | <input type="checkbox"/> A petition has been filed for this unsigned inventor |     |
| Given Name (first and middle (if any))                                                                   |              | Family Name or Surname                                                        |     |
| Alexandros Michael                                                                                       |              | Tourapis                                                                      |     |
| Inventor's Signature    |              | Date 12/25/04                                                                 |     |
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| Country                                                                                                  | USA          | Citizenship                                                                   | GR  |
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| Mailing Address                                                                                          |              |                                                                               |     |
| City                                                                                                     | West Windsor | State                                                                         | NJ  |
| Zip                                                                                                      | 08540        | Country                                                                       | USA |
| <b>Name of Additional Inventor, if any</b>                                                               |              | <input type="checkbox"/> A petition has been filed for this unsigned inventor |     |
| Given Name (first and middle (if any))                                                                   |              | Family Name or Surname                                                        |     |
| Jeffrey Allen                                                                                            |              | Cooper                                                                        |     |
| Inventor's Signature  |              | Date 12/13/04                                                                 |     |
| Residence: City                                                                                          | Rocky Hill   | State                                                                         | NJ  |
| Country                                                                                                  | USA          | Citizenship                                                                   | US  |
| Mailing Address 11 Toth Lane                                                                             |              |                                                                               |     |
| Mailing Address                                                                                          |              |                                                                               |     |
| City                                                                                                     | Rocky Hill   | State                                                                         | NJ  |
| Zip                                                                                                      | 08540        | Country                                                                       | USA |

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**DECLARATION****ADDITIONAL INVENTOR(S)  
Supplemental Sheet**

Page 4 of 4

|                                            |              |                                                                               |     |
|--------------------------------------------|--------------|-------------------------------------------------------------------------------|-----|
| <b>Name of Additional Inventor, if any</b> |              | <input type="checkbox"/> A petition has been filed for this unsigned inventor |     |
| Given Name (first and middle (if any))     |              | Family Name or Surname                                                        |     |
| Peng                                       |              | Yin                                                                           |     |
| Inventor's Signature <i>Peng Y</i>         |              | Date <i>11/09/2004</i>                                                        |     |
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| Country                                    | USA          | Citizenship                                                                   | CN  |
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| Mailing Address                            |              |                                                                               |     |
| City                                       | West Windsor | State                                                                         | NJ  |
| ZIP                                        | 08540        | Country                                                                       | USA |
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|                                            |              |                                                                               |     |
| Inventor's Signature                       |              | Date                                                                          |     |
| Residence: City                            |              | State                                                                         |     |
| Country                                    |              | Citizenship                                                                   |     |
| Mailing Address                            |              |                                                                               |     |
| Mailing Address                            |              |                                                                               |     |
| City                                       |              | State                                                                         |     |
| Zip                                        |              | Country                                                                       |     |
| <b>Name of Additional Inventor, if any</b> |              | <input type="checkbox"/> A petition has been filed for this unsigned inventor |     |
| Given Name (first and middle (if any))     |              | Family Name or Surname                                                        |     |
|                                            |              |                                                                               |     |
| Inventor's Signature                       |              | Date                                                                          |     |
| Residence: City                            |              | State                                                                         |     |
| Country                                    |              | Citizenship                                                                   |     |
| Mailing Address                            |              |                                                                               |     |
| Mailing Address                            |              |                                                                               |     |
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| Zip                                        |              | Country                                                                       |     |

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